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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **C10091** (2)

1. Corporation Name

**DUNNELLOD LODGE NO. 136 FREE AND ACCEPTED MASONS  
OF FLORIDA**

Principal Place of Business

Mailing Address

C/O ROY CONNOR SHEPPARD  
220 OCEAN ST.  
JACKSONVILLE FL 32202

C/O ROY CONNOR SHEPPARD  
220 OCEAN ST.  
JACKSONVILLE FL 32202



3. Date Incorporated or Qualified

**06/30/1992**

4. FEI Number

**23-7178744**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SHEPPARD, ROY CONNOR  
220 OCEAN STREET  
JACKSONVILLE FL 32202**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

*2/13/98*

12. OFFICERS AND DIRECTORS

TITLE	<b>WMD</b>	<input type="checkbox"/> DELETE
NAME	<b>DEAKINS, JOHN P</b>	
STREET ADDRESS	<b>125 BLUE RUN DRIVE</b>	
CITY-ST-ZIP	<b>DUNNELLOD FL 34432</b>	

TITLE	<b>JWD</b>	<input type="checkbox"/> DELETE
NAME	<b>BARNES, DONALD L</b>	
STREET ADDRESS	<b>20993 S.W. 2ND AVE</b>	
CITY-ST-ZIP	<b>DUNNELLOD FL</b>	

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>PAISLEY, CECIL W</b>	
STREET ADDRESS	<b>22680 SW ANCHOR BLVD.</b>	
CITY-ST-ZIP	<b>DUNNELLOD FL</b>	

TITLE	<b>TD</b>	<input type="checkbox"/> DELETE
NAME	<b>BLAHA, NOEL R</b>	
STREET ADDRESS	<b>1551 ST. ELIZABETH PLACE</b>	
CITY-ST-ZIP	<b>CITRUS SPRINGS FL</b>	

TITLE	<b>SD</b>	<input type="checkbox"/> DELETE
NAME	<b>LUME, GENNARO</b>	
STREET ADDRESS	<b>10121 N. DARWIN WAY</b>	
CITY-ST-ZIP	<b>CITRUS SPRINGS 2L 34434-3415</b>	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. WORSHIPFUL MASTER (D)

1.1 **Donald Leon Barnes**  
1.2 **20993 SW 2nd Ave**  
1.3 **Dunnellon FL 34431**

1.4 SECRETARY (D)

2.1 **Gennaro Lume**  
2.2 **10121 N. Darwin Way**  
2.3 **Citrus Springs FL 34434-3415**

2.4 SENIOR WARDEN (D)

3.1 **Roy Karl Langva**  
3.2 **9836 S W 198TH Circle**  
3.3 **Dunnellon FL 34431**

3.4 JUNIOR WARDEN (D)

4.1 **Richard Simon Sylvis**  
4.2 **944 N Lady Terr**  
4.3 **Dunnellon FL 34434**

4.4 TREASURER (D)

5.1 **John Patrick Deakins**  
5.2 **125 Blue Run Drive**  
5.3 **Dunnellon FL 34432**

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